

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION

City, Town,
or Plantation

AUGUSTA

St or Road

1098 Tasker Rd.

Subdivision, Lot #

>> Caution: Permit Required -- Attach In Space Below <<

AUGUSTA

Date
Permit
Issued:

Local Plumbing Inspector Signature

PERMIT # 6478 TOWN COPY

\$ 152.00

☐ If
FEE Double Fee
Charged

L.P.I. # 1288

OWNER/APPLICANT INFORMATION

Name (last, first, MI)
Owner

WINSLOW CHARLES G. SR.

Applicant

same

Mailing Address
of

1093 Tasker Rd.

☒ Owner

☒ Applicant

AUGUSTA, ME. 04330

Daytime Tel. #

623-3528

Municipal Tax Map # 666 Lot # 6

Owner or Applicant Statement

I state that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

Signature of Owner or Applicant

8-4-10
Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION

- ☐ First Time System
- ☒ Replacement System
Type Replaced: metal tank
Year Installed: 1950's
- ☐ Expanded System
 - ☐ Minor expansion
 - ☐ Major expansion
 - ☐ Experimental System
- ☐ Seasonal Conversion

THIS APPLICATION REQUIRES

- ☐ No Rule Variance
- ☐ First Time System Variance
 - ☐ Local Plumbing Inspector Approval
 - ☐ State & Local Plumbing Inspector Approval
- Replacement System Variance
 - ☐ Local Plumbing Inspector Approval
 - ☐ State & Local Plumbing Inspector Approval
- ☐ Minimum Lot Size Variance
- ☐ Seasonal Conversion Approval

DISPOSAL SYSTEM COMPONENT(S)

- ☐ Complete Non-engineered System
- ☐ Primitive System (graywater & alt toilet)
- ☐ Alternative Toilet, specify: _____
- ☒ Non-Engineered Treatment Tank (only)
- ☐ Holding Tank, _____ gallons
- ☐ Non-engineered Disposal Field (only)
- ☐ Separated Laundry System
- ☐ Complete Engineered System (2000 gpd or more)
- ☐ Engineered Treatment Tank (only)
- ☐ Engineered Disposal Field (only)
- ☐ Pre-treatment, specify: _____

SIZE OF PROPERTY

90 x 75 wide ☐ sq. ft.
230 - 225 wide ☐ acres

DISPOSAL SYSTEM TO SERVE

- ☒ Single Family Dwelling Unit, No. of Bedrooms: 1
- ☐ Multiple Family Dwelling, No. of Units: _____
- ☐ Other: _____

SHORELAND ZONING

☐ Yes ☐ No

SPECIFY

TYPE OF WATER SUPPLY

- ☐ Drilled Well
- ☐ Dug Well
- ☐ Private
- ☐ Public
- ☒ Other: lake

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- ☐ Concrete
 - ☐ Regular
 - ☒ Low Profile
- ☐ Plastic
- ☐ Other: _____
CAPACITY _____ gallons

DISPOSAL FIELD TYPE & SIZE

- ☐ Stone Bed
- ☐ Stone Trench
- ☐ Proprietary Device
 - ☐ Cluster array
 - ☐ Regular load
- ☐ Other: _____
SIZE _____ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

- ☐ No
- ☐ Maybe
- ☐ Yes >> Specify one below:
 - ☐ Multi-compartment Tank
 - ☐ Tanks in Series
 - ☐ Increase in Tank Capacity
 - ☐ Filter on Tank Outlet

DESIGN FLOW

_____ gallons per day

BASED ON:

- ☐ Table 901.1 (dwelling unit(s))
 - ☐ Table 901.2 (other facilities)
- SHOW CALCULATIONS
-- for other facilities --

SOIL DATA & DESIGN CLASS

PROFILE CONDITION
DESIGN

at Observation Hole # _____
Depth _____" Elevation _____"
OF MOST LIMITING SOIL FACTOR

DISPOSAL FIELD SIZING

- ☐ Small -- 2.0 sq. ft./gpd
- ☐ Medium -- 2.6 sq. ft./gpd
- ☐ Medium-Large -- 3.3 sq. ft./gpd
- ☐ Large -- 4.1 sq. ft./gpd
- ☐ Extra Large -- 5.0 sq. ft./gpd

PUMPING

- ☐ Not Required
- ☐ May Be Required
- ☐ Required >> Specify only for
engineered or experimental systems:
DOSE: _____ gallons

- ☐ Section 903.0 (meter readings)

ATTACH WATER-METER DATA

SITE EVALUATOR STATEMENT

I Certify that on _____ (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature

SE #

Date

Site Evaluator Name Printed

Telephone #

RECEIVED
MAY 23 2001

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HHE 200 Rev. 6/00